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FEB - 4 2019

(Rev. 8/3/15)

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WESTERN DISTRICT OF LOUISIANA
SHREVEPORT, LOUISIANA
BY MBT

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF LOUISIANA
LAKE CHARLES DIVISION

JEFFERY L ALEXANDER #17560-035

CASE NO. 2:18-CV-01457 SEC P

VERSUS

UNASSIGNED DISTRICT JUDGE

USA

MAGISTRATE JUDGE KAY

APPLICATION TO PROCEED *IN FORMA PAUPERIS*
PURSUANT TO 28 U.S.C. ' 1915

I, Jeffery L Alexander, prisoner/ICE identification number 17560-035, declare that I am the Plaintiff ☒ / Petitioner ☒ in this case.

- If you are a plaintiff in a civil rights action, are you serving a criminal sentence? Yes ☒ No ☐
- If you are **not** serving a criminal sentence, are you being held pursuant to a detainer placed upon you by a government agency such as the U.S. Immigration and Customs Enforcement (ICE)? Yes ☐ No ☐

☐ Movant (filing 28 U.S.C. ' 2255 motion)

☐ Other _____

In support of my request to proceed without prepayment of the full filing fee or costs under 28 U.S.C. ' 1915, I declare that I am unable to pay the full filing fee or costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

1. Are you incarcerated? Yes ☒ No ☐

If "Yes," state place of incarceration: FCI Oakdale 1, Louisiana

If "No," this is the incorrect form. You should request the Application to Proceed *In Forma Pauperis* for non-prisoners.

2. Do you have a work, program, status assignment, or other circumstances which causes you to be paid by the prison, jail, or other custodial institution? Yes ☒ No ☐

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3. In the past 12 months have you received money from the following sources? If so, stat the total amount received. Amount

- a. Business, profession or other self-employment Yes ☐ No ☒ \$ N/A
- b. Rent payments, interest, or dividends Yes ☐ No ☒ \$ N/A
- c. Pensions, annuities, or Life insurance payments Yes ☐ No ☒ \$ N/A
- d. Disability or Worker's Compensation Payments Yes ☐ No ☒ \$ N/A
- e. Gifts or Inheritances Yes ☐ No ☒ \$ N/A
- f. Any other sources Yes ☐ No ☒ \$ N/A

If the answer to any of the above is "Yes," describe each source of money and state the amount received **and** the amount that you expect to continue to receive.

4. Do you have **any** cash or checking or savings accounts outside the prison? Yes ☐ No ☒ Amount \$ N/A
5. Do you have any secondary savings account, such as a certificate of deposit or a savings bond? Yes ☐ No ☒ Amount \$ N/A
6. Do you own any assets including real estate, stocks, bonds, securities, other financial instruments, automobiles, or other valuable property? Yes ☐ No ☒

If "Yes," describe each asset and state its value:

	<u>Value</u>
Automobiles _____	\$ <u>N/A</u>
Make/Model/Year _____	\$ <u>N/A</u>
Stocks _____	\$ <u>N/A</u>
Bonds _____	\$ <u>N/A</u>
Notes _____	\$ <u>N/A</u>
Real Estate _____	\$ <u>N/A</u>
	Mortgage Amount \$ <u>N/A</u>
Other _____	\$ <u>N/A</u>

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7. Have you on any prior occasion, while incarcerated or detained in any prison, jail, or other facility, brought an action in federal court that was dismissed on the grounds that it was frivolous, malicious, or failed to state a claim upon which relief could be granted?

Yes ☐ No ☒

If "Yes," list the dismissals:

<u>Date Dismissed</u>	<u>Case Name</u>	<u>Case Number</u>	<u>Court</u>
N/A	N/A	N/A	N/A
	vs.		
	vs.		
	vs.		

I declare under penalty of perjury that I have submitted a complete statement of all of the assets that I possess and that all of the information set out above is true and correct.

Executed on November 21, 2018
(Date)

Jeffery L. Alexander
(Signature of Applicant)

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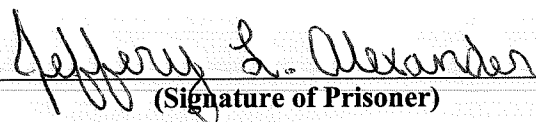
Case Number: 2:18-CV-01457 SEC P**AUTHORIZATION**

I, Jeffery L. Alexander prisoner/ICE detainee identification number 17560-035, request and authorize the institution holding me in custody, to send to the Clerk of Court for the United States District Court, Western District of Louisiana, a certified copy of the statement for the last six months of my account at the institution where I am incarcerated and/or detained. If required by this court, I further authorize the institution holding me to forward from my account to the Clerk of Court any initial partial filing fee assessed by the Court in the amount of 20 percent of the greater of the average monthly deposits to my prison account or the average monthly balance in my prison account for the six-month period immediately preceding the filing of this complaint or petition. Thereafter, if I am a prisoner and not an ICE detainee, I authorize the institution of incarceration to forward monthly payments of 20 percent of my preceding month's income credited to my prison account to the Clerk of Court each time my balance exceeds \$10.00 until I have paid the filing fee in full.

This authorization is furnished in connection with the commencement of a civil action, and I understand that the total amount of filing fees for which I am obligated is \$350.00 if this application is granted or \$400.00 if denied. I also understand if I am a prisoner and not an ICE detainee that these fees will be debited from my account regardless of the outcome of my civil action. This authorization shall apply to any other institution into whose custody I may be transferred.

I further acknowledge that I have not directly or indirectly paid or caused to be paid to any inmate, agent of an inmate, or family member of an inmate a sum of money, favors or anything else for assistance in the preparation of this document or any other document in connection with this action.

November 21, 2018
(Date)


(Signature of Prisoner)

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CERTIFICATE

I request that an authorized officer of the institution in which I am confined, or other designated entity, complete the below financial certificate. I understand that:

1. If I commence a petition for Writ of Habeas Corpus in federal court pursuant to 28 U.S.C. ' 2254 or 28 U.S.C. ' 2241, the filing fee is \$5.00, and such fee will have to be paid by me.
2. If I file a civil action with this court (such as an action pursuant to 42 U.S.C. ' 1983) the filing fee is \$400.00, and, that:
 - a. If my current account balance at the institution is \$400.00 or more, I will not qualify for *in forma pauperis* status and I must pay the full filing fee of \$400.00 before I will be allowed to proceed with the action;
 - b. If my current account balance at the institution is \$400.00 or less and I am a prisoner and not an ICE detainee, that before the action will be served on the defendants, I will be required to pay 20 percent of my average monthly balance, or the average monthly deposits to my account, whichever is greater. Thereafter I must pay installments of 20 percent of the preceding month's deposits to my account in months that my account balance exceeds \$10.00, and I hereby authorize the institution where I am confined to make such deductions. I must continue to make installment payments until the **\$350.00 (\$400.00 minus a \$50.00 administrative fee)** filing fee is fully paid, without regard to whether my action is closed or my release from confinement;
 - c. If my current account balance at the institution is \$400.00 or less and I am an ICE detainee granted IFP status, I will not pay any of the \$400.00 filing fee in a civil matter and will only pay \$5.00 in a habeas matter. If I am an ICE detainee and I am denied IFP status, I must pay the full \$400.00 filing fee.
3. I further state that I have not directly or indirectly paid or cause to be paid to any inmate, agent of an inmate, or family member of any inmate a sum of money, favors or anything else for assistance in the preparation of this document or any other document in connection with this action.
4. If I am located in a prison participating in the Electronic Filing Pilot Project, I consent to receive orders, notices, and judgments by Notice of Electronic Filing.

November 21, 2018 Jeffery L Alexander
 (Date) (Printed Name of Applicant)

17560-035
 (Signature & Prison Number of Applicant)

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**TO BE COMPLETED BY THE INSTITUTION OF INCARCERATION OR
DETENTION**

I certify that Jeffery L Alexander #17560-035 (prisoner/detainee name and number) has the current sum of \$ N/A on account to his credit at N/A (name of institution). I further certify that during the past six months the applicant's average balance was \$ N/A and that the applicant's average monthly deposits were \$ N/A. I have attached a certified copy of the applicant's prison trust fund account showing at least the past six months' transactions.

I further certify that the applicant does ☐ / does not ☒ have a secondary savings account(s), such as a certificate of deposit or savings bond. The secondary account(s) balance, if any, is \$ N/A.

November 21, 2018
(Date)

Elect To Pay Filing Fee
(Signature of Authorized Officer)

Elect To Pay Filing Fee
(Printed Name of Authorized Officer)